

BPD ALLIANCE LEGACY SOCIETY

Planned Gift Donor Intent Form

Thank you for your interest in supporting BPD Alliance!
Please email this form to thankyou@neabpd.org or mail
to the address listed.

Name

Mailing Address

City

State

Zip Code

Phone Number

Email

☐ Check if you would like
to keep this gift anonymous.

**To continue to advance the mission of BPD Alliance,
I/we have made, or intend to make a planned gift to BPD Alliance.**

My/our gift will be made by:

*Choose one of the following: Bequests in Will or Living Trusts, Charitable Gift Annuities, Charitable Lead Trusts,
Charitable Remainder Trusts, Gifts of Plans and Policies, Life Insurance Policies, Real Estate Gifts, Life Estate Gifts or
Other Endowment Gifts*

☐ Amount

☐ Percentage

Choose either amount or percentage

Estimated
Amount

Please list my/our
name as follows

Please provide any
details you wish to
share about your
gift

Signature

Date